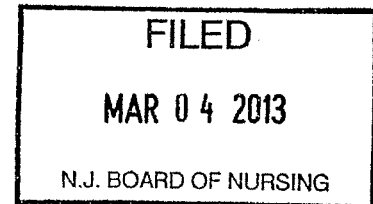


JEFFREY S. CHIESA
ATTORNEY GENERAL OF NEW JERSEY
Division of Law 5th Floor
124 Halsey Street
P.O. Box 45029
Newark, New Jersey 07101
Attorney for the Board of Nursing



By: DAG Susan Carboni
Tel. (973) 648-2894

STATE OF NEW JERSEY
DEPARTMENT OF LAW & PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
BOARD OF NURSING

IN THE MATTER OF THE SUSPENSION :	Administrative Action
OR REVOCATION OF THE LICENSE OF :	
:	
TINA L. WALDRON, R.N. :	ORDER OF SUMMARY
a/k/a TINA DeFEIS, :	SUSPENSION
LICENSE NO. NR09569400 :	
:	
TO PRACTICE AS A :	
REGISTERED NURSE (R.N.) IN THE :	
STATE OF NEW JERSEY :	

This matter was opened to the New Jersey State Board of Nursing (" Board") upon the receipt of information indicating the following;

1. Respondent was a registered nurse in the State of New Jersey whose nursing license expired on May 31, 2002.

2. On or about November 28, 2012, the Board sent a

request for information to respondent's last address of record with the Board following receipt of a complaint from Kindred Healthcare alleging that respondent had been terminated after the facility learned that she had misrepresented her licensure status by indicating that she was licensed in Florida and was in the process of reinstating her New Jersey nursing license, when in fact respondent was not licensed in Florida, and was not at the time in the process of reinstating her New Jersey license.

(Exhibit A)

3. The inquiry was sent to respondent's address of record with the Board by certified and regular mail. Both mailings were returned, marked "Attempted, not known, unable to forward."

(Exhibit B)

4. A follow-up inquiry was sent by certified and regular mail on February 11, 2013 to an alternative address for respondent provided by Kindred Healthcare. Both mailings were returned, marked "not deliverable as addressed, unable to forward." (Exhibit C)

3. Pursuant to N.J.S.A. 4:1-7.1(b), any nursing license which has not been renewed within 30 days of its expiration date is suspended without a hearing.

ACCORDINGLY,

IT IS on this 4th day of March, 2013

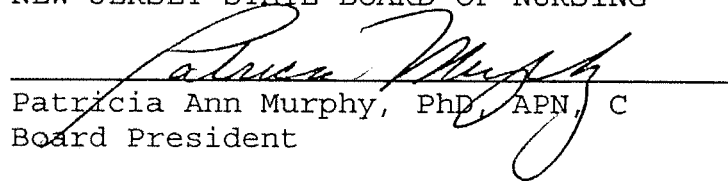
HEREBY ORDERED that:

1. Respondent's license to practice nursing in the State of New Jersey was suspended pursuant to N.J.S.A. 45:1-7.1(b) as of July 2, 2002, and remains in suspended status at this time.

2. Upon any application for reinstatement of license, respondent shall respond in full to the Board's inquiry concerning the allegations by Kindred Healthcare. The Board reserves the right to bring disciplinary action in connection with these allegations if warranted.

NEW JERSEY STATE BOARD OF NURSING

By:


Patricia Ann Murphy, PhD, APN, C
Board President

EXHIBIT

A



CHRIS CHRISTIE
Governor

KIM GUADAGNO
Lt. Governor

New Jersey Office of the Attorney General

Division of Consumer Affairs
New Jersey Board of Nursing
124 Halsey Street, 6th Floor, Newark, NJ 07102
www.njconsumeraffairs.gov/medical/nursing.htm



JEFFREY S. CHIESA
Attorney General

ERIC T. KANEFSKY
Acting Director

Mailing Address:
P.O. Box 45010
Newark, NJ 07101
(973) 504-6430

November 28, 2012

Certified Mail RRR/ & Regular Mail

Tina L. Waldron
286 High Mountain Road
North Haledon, N.J. 07508

RE: COMPLAINT

Dear Ms. Waldron:

The Board of Nursing received information from Kindred Healthcare that your employment was terminated after they learned you did not have an active nursing license and misrepresented other credentials. Specifically, you were hired as the education coordinator and represented that you were licensed in Florida and in the process of reinstating your license in New Jersey (your NJ license expired in 2002). In fact, you are not licensed in Florida and you abandoned your reinstatement application in NJ in 2006; you never had the required criminal background check. At some point you worked four (4) clinical shifts as a RN before Kindred Healthcare learned you had not reinstated your NJ license. You worked those shifts but did not possess a valid license at the time.

Before the Board determines how to resolve this complaint, your response to the allegations is needed. Please provide answers to the following questions so that the Board is apprized of your version of the incident.

Please submit your written answers together with the enclosed certification within ten (10) days upon receipt. As a licensee of the Board of Nursing you are obligated to respond to investigative demand such as this under the requirements of N.J.S.A. 45:1-21(e) and N.J.A.C.13:45C-1.3.

Very truly yours,

George J. Hebert, MA, R.N.
Executive Director

GJH/te

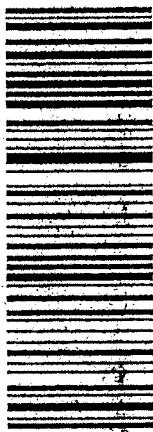
PROVIDE A LEGIBLE COMPLETE RESPONSE ON SEPARATE SHEETS OF PAPER, PROVIDE ADDITIONAL INFORMATION AS NEEDED AND MAIL THIS DEMAND FOR WRITTEN STATEMENT UNDER OATH BACK TO THIS OFFICE within **ten (10)** days upon receipt.

1. State the name and address of your current place(s) of employment. (If you are employed or listed at more than one facility or agency, please list all names and addresses). For each place of employment, indicate your date of hire, your title, shift worked, hours of work per week and the name of your nursing supervisor and his/her title. Also indicate the name of your employer at the time of the alleged incident.
2. Provide a copy of your most recent performance appraisal or performance evaluation from each place of your current nursing employment. If you have not had a performance evaluation within the last six (6) months, please submit a letter from your supervisor or director of nursing indicating an up to date appraisal of your work performance. Please keep this office apprized of any change in employment status during the pendency of this matter.
3. If you are not currently employed, state last date you worked as a nurse.
4. Are you licensed in any other state? If so, identify the state and if there has been any investigation or disciplinary action taken against you in that state.
5. Have you ever been arrested or convicted of any crime or offense (including DUI, DWI and Disorderly Persons Offense)? If so, identify the offense(s), provide the dates of arrest and/or conviction and its disposition.
6. Have you been terminated or asked to resign from any place of nursing employment? If so, describe the name and address of the employer, the date and the circumstances surrounding the termination or resignation and the date when this occurred.
7. State the name and address of the nursing school you graduated from and the date of graduation.
8. Please provide your version of what occurred.
9. Do you have anything further that you wish the Board to consider?

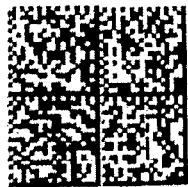
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NJ Office of the Attorney General
DIVISION OF CONSUMER AFFAIRS
NEW JERSEY BOARD OF NURSING
P.O. BOX 45010
NEWARK, NJ 07101

CERTIFIED MAILTM



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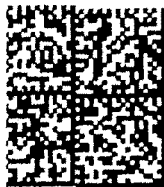
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NJ Office of the Attorney General
DIVISION OF CONSUMER AFFAIRS
NEW JERSEY BOARD OF NURSING
P.O. BOX 45010
NEWARK, NJ 07101

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to sender*



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C



CHRIS CHRISTIE
Governor

KIM GUADAGNO
Lt. Governor

State of New Jersey
OFFICE OF THE ATTORNEY GENERAL
DEPARTMENT OF LAW AND PUBLIC SAFETY
DIVISION OF LAW
PO Box 45029
NEWARK, NJ 07101

JEFFREY S. CHIESA
Attorney General

CHRISTOPHER S. PORRINO
Director

February 11, 2013

By certified and regular mail
Ma, Tina DeFeis
a/k/a Tina Waldron
247 Parsippany Road
Whippany, NJ 07981

Re: No response to Board of Nursing Inquiry

Dear Ms. DeFeis/Waldron:

The New Jersey State Board of Nursing sent the enclosed request for information to your address of record, but received no response. Please respond to the enclosed questions. For the sake of efficiency, please forward your response to:

D.A.G. Susan Carboni
Division of Law
P.O. Box 45029
124 Halsey Street, 5th Floor,
Newark, NJ 07101

In addition, please indicate the address the Board should consider as your address of record. Thank you.

Very truly yours,

JEFFREY S. CHIESA
ATTORNEY GENERAL OF NEW JERSEY

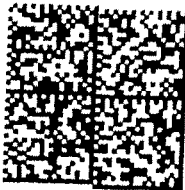
By: *Susan Carboni*
Susan Carboni
Deputy Attorney General

Enc.



STATE OF NEW JERSEY
DEPARTMENT OF LAW AND PUBLIC SAFETY
DIVISION OF LAW
124 HALSEY STREET
P.O. BOX 45029
NEWARK, NJ 07101-5029

SUSAN CARBONI, DAG



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02/13/2013

Mailed From 08648

US POSTAGE

Ma, Tina DeFeis
a/k/a Tina Waldron
247 Parsippany Road
Whippany, NJ 07981

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RETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD

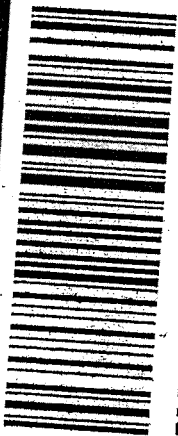
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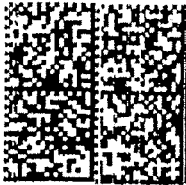
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STATE OF NEW JERSEY
DEPARTMENT OF LAW AND PUBLIC SAFETY
DIVISION OF LAW
124 HALSEY STREET
P.O. BOX 45029
NEWARK, NJ 07101-5029

SUSAN CARBONI, DAG



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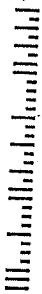
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CERTIFIED MAIL/RETURN RECEIPT REQUESTED **

Ma, Tina DeFeis

a/k/a Ting Waterson

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NOTES TO SENDER

UNDELIVERABLE AS ADDRESSEE
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